NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

NEW MEXICO OIL CONSERVATION COMMISSION

5a. Indicate Type of Lease
State ☐   Fee ☒☒

5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT —" (FORM C-101) FOR SUCH PROPOSALS.)

1.
OIL WELL ☒☒   GAS WELL ☐   OTHER-

7. Unit Agreement Name

2. Name of Operator

Gulf Oil Corporation

8. Farm or Lease Name

W. D. Grimes (NCT-A)

3. Address of Operator

Box 670, Hobbs, New Mexico 88240

9. Well No.

16

4. Location of Well

UNIT LETTER __D__ , __800__ FEET FROM THE __North__ LINE AND __700__ FEET FROM

THE __West__ LINE, SECTION __32__ TOWNSHIP __18-S__ RANGE __38-E__ NMPM.

10. Field and Pool, or Wildcat

Hobbs Blinebry

15. Elevation *(Show whether DF, RT, GR, etc.)*

3636' GL

12. County

Lea

16.
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	COMMENCE DRILLING OPNS. ☐		PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	CHANGE PLANS ☐	CASING TEST AND CEMENT JOB ☐	
		OTHER _____	☐
OTHER _____ ☐		**Acidized**	

17. Describe Proposed or Completed Operations *(Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work)* SEE RULE 1103.

6350' PB.
    Pumped 500 gallons of 15% NE acid down casing over perforations 5871' to 6083'. Flushed with 100 barrels of oil. Returned well to production.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED _____ TITLE __Area Engineer__ DATE __July 29, 1975__

Orig. Signed by

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: